

On **December 14, 2020**, the State Employee Benefits Committee (SEBC) approved award of pharmacy benefit management to **CVS Health**.



The State Group Health Plan will transition from Express Scripts to CVS Health for active employees and non-Medicare retirees on **July 1, 2021**. Medicare retirees will transition on **January 1, 2022**.

CVS Health provides several resources to support members, including:

- A convenient and easy to use Mobile App
- Two-way text alerts and refill reminders
- CVS Pharmacy Pickup and Delivery Options
- Mobile access to Member ID Cards

Why is the State changing pharmacy benefits in the middle of a pandemic?

The State Employee Benefits Committee (SEBC) routinely reviews benefit options as required by State procurement requirements and to support their mission to provide employees high quality care at an affordable cost. A review of the pharmacy benefit management provider was already planned for 2020.

Do I have to fill my prescriptions at only CVS pharmacies starting July 1, 2021?

No. Retail pharmacy options will not be restricted to CVS pharmacies. Over 66,000 pharmacies including all major chains - Walgreens, Rite Aid, CVS, Walmart and Target will still be available. Network pharmacy changes are expected to be minimal. CVS Health will reach out to members directly in advance of the transition to provide notification of any changes and suggested alternatives.

Will my current prescriptions be covered under CVS Health?

Formulary changes are expected to be minimal. CVS Health will reach out to members directly in advance of the transition to provide notification of any changes and suggested alternatives.

PLEASE NOTE: Formulary changes are standard and typically occur twice annually in January and July. The changes resulting from the transition to CVS Health are not anticipated to be much different than what already occurs during each plan year.

Prescription drug savings programs for generic, maintenance, mail order and diabetic medications/supplies will remain in place. In addition, Prior Authorization and step therapy requirements will also remain in place.

Will I experience a change in my mail order prescriptions?

CVS Health provides an Automatic Refill and Renewal program for home delivery. CVS Health will work closely with the current pharmacy benefit manager, Express Scripts, to transition all open refills to prevent disruption to member mail orders.

Will I receive a new prescription card?

Yes, non-Medicare members will receive new cards following the May 2021 Open Enrollment for coverage effective **July 1, 2021**. The new card will reference CVS Caremark, but will be accepted at all participating pharmacies, including Walgreens, Rite Aid, CVS, Walmart and Target.

How will the pharmacy benefit change effect Medicare Part D members January 1, 2022?

Medicare Part D members will transition to CVS Health/SilverScript EGWP effective **January 1, 2022**. CVS Health will coordinate with CMS (Centers for Medicare & Medicaid Services) in order to provide continued coverage. More information will be provided to Medicare members during 2021 Fall Open Enrollment and prior to **January 1, 2022**, through direct home mailings from CVS regarding the change and any impact on individual prescriptions.



Questions? Call 1-800-489-8933 for a Customer Service Specialist.